

MOTION BY SUPERVISOR ZEV YAROSLAVSKY

December 13, 2011

Amendment to Item #19

Item #19 on the Agenda is a recommendation by the Department of Public Health (DPH) to extend an innovative substance abuse treatment and recovery program. Known as Medication Assisted Therapy (MAT), the program adds anti-addiction medication to the substance abuse treatment portfolio. Specifically, treatment clients are offered the use of extended-release naltrexone (called Vivitrol) which is an injectable medication that reduces cravings for alcohol and opioids.

When used in conjunction with conventional outpatient or residential treatment, Vivitrol has been shown to reduce the urge to use alcohol and opioids, thereby averting dependence and relapse. The Food and Drug Administration (FDA) approved Vivitrol for the treatment of alcohol dependence in 2006 and for the treatment of opioid dependence in 2010. Vivitrol is not addictive or psychoactive, and the medication negates the euphoric effects of alcohol and opiates. Simply put, this medication helps people stay in treatment longer, which is critical because studies have shown that long-term recovery rates improve the longer an alcoholic or drug user remains in treatment. Research conducted by insurance providers has also demonstrated that Vivitrol can reduce the hospitalization, pharmacy and medical costs of treating their alcohol-dependent clients.

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In 2010, DPH initiated a Vivitrol pilot project with three contracted community-based treatment programs and the Antelope Valley Rehabilitation Center. The UCLA-Integrated Substance Abuse Programs is presently in the final stages of completing its evaluation of the pilot project. DPH indicates there are some very promising initial findings such as:

- Treatment completion rates for clients of outpatient and residential treatment programs were almost twice as high for clients who have taken at least one dose of Vivitrol (64%) compared to those who have not taken the medication (34%).
- Outpatient and residential clients who received Vivitrol also showed much greater reductions in drug use after discharge from their treatment programs than clients who did not receive Vivitrol. This is true despite the fact that the clients receiving Vivitrol had a higher level of substance use when they entered the treatment programs. Vivitrol clients receiving outpatient services reported a drop in days of use after completing treatment of 89% compared to their days of use before entering treatment. In contrast, clients not receiving Vivitrol were able to cut their usage by 65%.
- Residential treatment clients who received Vivitrol stayed in treatment over 55% longer than clients who did not receive the medication. Treatment completion rates were also much better for clients receiving Vivitrol (64% vs. 39%).

These initial findings from the Vivitrol pilot suggest a promising future for the incorporation of MAT into more substance abuse treatment programs to reach a broader array of high-risk populations. However, the relatively high cost of Vivitrol has resulted in limited access to this important medication for the majority of our neediest County residents, those who are uninsured and/or indigent. DPH should report back to the Board on possible public policy changes that could be implemented now in order to ease access to Vivitrol and MAT. The Department should also continue to analyze the lessons learned from the pilot phase of this program and to evaluate the efficacy of Vivitrol and MAT to improve patient outcomes.

I, THEREFORE, MOVE that the Board of Supervisors:

A. Instruct the Director of Public Health to report back in 12 months on:

- 1) The efficacy of Vivitrol and MAT as cost-effective measures to improve medium- and long-term patient outcomes for clients of DPH-funded services; and
- 2) Recommendations for the expanded use of Vivitrol and MAT in high-risk, high-consequence populations such as the County's drug court, jail and probation settings, and DUI and drinking-driver programs.

B. Instruct the Director of Public Health to report back in 90 days on:

- 1) Policy changes needed to expand the availability of Vivitrol in public coverage programs such as Medi-Cal; and
- 2) Recommendations on how the Vivitrol used in this project can be purchased at the most affordable price.